
**TRANSMITTAL
FORM**

Total Number of Papers in This Submission	Eight	Attorney Docket Number	HARR0032-101
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ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment and Request For Reconsideration in response to Office Action mailed July 6, 2005 <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Supplemental Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) (Replacement Sheets for Figs. 1a, 1b, and 1c (Sheet 1/23), Figs. 6a, 6b and 6c (Sheet 6/23) and Figs. 10a, 10b and 10c (Sheet 13/23)) <input checked="" type="checkbox"/> Drawing(s) (Annotated Sheets Showing Changes for Figs. 1a, 1b, and 1c (Sheet 1/23), Figs. 6a, 6b and 6c (Sheet 6/23) and Figs. 10a, 10b and 10c (Sheet 13/23)) <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): - USPTO Form SB/08B, Listing References BY-CC; 5 Publications Cited; 5 Copies Submitted - Copy of Utility Patent Application Transmittal for Application Serial No. 10/607,479	
		Remarks	
		EXPRESS MAIL LABEL NO.: EV146 601 865US	
		DATE OF DEPOSIT: January 6, 2006	

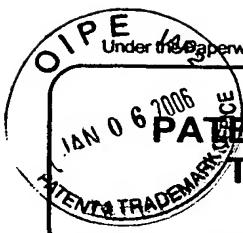
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm	Cozen O'Connor, P.C.		
Signature			
Printed Name	Doreen Yatko Trujillo		
Date	January 6, 2006	Reg. No.	35,719

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence and accompanying papers are being deposited with the United States Postal Service with sufficient postage in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature			
Typed or printed name	Doreen Yatko Trujillo	Date	January 6, 2006



UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

- Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
- Applicant claims small entity status.
See 37 CFR 1.27.
- Specification [Total Pages 53]
(preferred arrangement set forth below)
 - Descriptive title of the Invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (*if filed*)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
- Drawing(s) (35 U.S.C. 113) [Total Sheets 23]
- Oath or Declaration [Total Sheets 04]
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 CFR 1.63 (d))
(for a continuation/divisional with Box 18 completed)
 - i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
- Application Data Sheet. See 37 CFR 1.76

Attorney Docket No.	HARR0032-101
First Inventor	Lawrence S. Young et al.
Title	GENE EXPRESSION USING T CELL FACTOR RESPONSIVE ELEMENT
Express Mail Label No.	EV147 612 493 US

APPLICATION ELEMENTS	ADDRESS TO:
Commissioner for Patents Mail Stop Patent Application P.O. Box 1450 Alexandria VA 22313-1450	
7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (<i>if applicable, all necessary</i>) <ol style="list-style-type: none"> a. <input checked="" type="checkbox"/> Reference To Computer Readable Form (CRF) b. Specification Sequence Listing on: <ol style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input checked="" type="checkbox"/> paper c. <input checked="" type="checkbox"/> Statements verifying identity of above copies 	
ACCOMPANYING APPLICATIONS PARTS	
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 C.F.R. 3.73(b) Statement <input checked="" type="checkbox"/> Copy Power of Attorney (<i>when there is an assignee</i>) 11. <input type="checkbox"/> English Translation Document (<i>if applicable</i>) 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) Were Received in Prior Application Serial No. 09/798,128, Filed March 21, 2001 (<i>if foreign priority is claimed</i>) 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other:	

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No: 09/798,128, Filed: March 21, 2001, which claims priority under 35 U.S.C. § 119(a)-(d) of United Kingdom Application No. 0005099.7, filed March 2, 2000 and also claims the benefit under 35 U.S.C. § 119(e) of U.S. Application Serial No. 60/187,465, filed March 6, 2000, and claims benefit under 35 U.S.C. § 119(a)-(d) of PCT Application No. PCT/GB01/00856, filed March 1, 2001, each of which is incorporated by reference herein in their entirities.

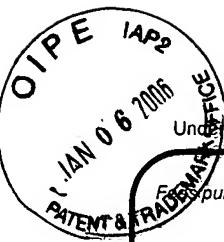
Prior application information: Examiner Scott D. Priebe Art Unit: 1632
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label		34139 (Insert Customer Number or Bar Code Label here)	<input type="checkbox"/> or <input type="checkbox"/> Correspondence address below
Name	34139		
Address	PATENT TRADEMARK OFFICE		
City	State	Zip Code	
Country	Telephone	Fax	
Name (Print/Type)	Doreen Yatko Trujillo	Registration No. (Attorney/Agent)	35,719
Signature	<i>Doreen Yatko Trujillo</i>		Date June 26, 2003

USE PATENT TRANSMISSION FORM

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL for FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 690.00)

Complete If Known	
Application Number	10/607,479
Filing Date	June 26, 2003
First Named Inventor	Lawrence S. Young et al.
Examiner Name	Scott D. Priebe
Art Unit	1633
Attorney Docket No.	HARR0032-101

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify) :

Deposit Account Deposit Account Number: 50-1275 Deposit Account Name: Cozen O'Connor, P.C.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- | | |
|---|--|
| <input checked="" type="checkbox"/> Charge fee(s) indicated below | <input checked="" type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) | <input checked="" type="checkbox"/> Credit any overpayments |

Under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		
	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>
<u>29</u>	- <u>29</u> or HP= <u>00</u>	x _____	= _____	50	25	

HP = highest number of total claims paid for, if greater than 20.

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
<u>04</u>	- <u>04</u> or HP= <u>00</u>	x _____	= _____			

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
_____	- 100 = _____	/ 50 = _____ (round up to a whole number) x _____	= _____	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Three-Month Extension of Time Fee (\$510) and Supplemental Information Disclosure Statement Fee (\$180)

\$690.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	35,719	Telephone	(215) 665-5593
Name (Print/Type)	Doreen Yatko Trujillo			Date	January 6, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.